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APPLICATION NO.	FE NO DATE	PERT NAMED INVENTOR	ATTORNEY DOCKET NO.	CONPIRMATION NO.		
10/749,711	12/31/2003	Kutian Jacob	CS20960RL	9214		
TITLE OF INVENTION: METHOD AND APPARATUS FOR DELIVERING SERVICES						

APPLAL TYPE SMALL ENUTY ISSUE PEFOES PUBLICATION FEE DUE PREV PAID ISSUE FEB TOTAL FEEDS: DUE DATE DUE nonprovisional NO \$1510 \$300 en \$1210 08/25/2014 BXAMINER ARTUNET CLASS-SUBCLASS NOUYEN, KHALMINR 2617 455-456300 1. Chance of correspondence address or indication of 'Fee Address' (37) 2. For printing on the patent front page, list CFR 1.363) (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Castomer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 57 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Motorola Mobility, Inc. Libertyville, IL Please check the appropriate assignce category or categories (will not be printed on the patent): 🚨 Individual 🗸 Corporation or other private group entity

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